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## UTILITY PATENT APPLICATION TRANSMITTAL

Docket No.: PARM-01137 First In Title: Multifunction Exercise Device	nventor: Parmater, Kim Express Mail No.: ET529196259US						
Application Elements	Address to: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231						
1. X Fee Transmittal Form (original and copy)  2. X Applicant claims small entity status (37 CFR 1.27)  3. X Specification Total Pages: 14 - Descriptive title of the invention - Cross Reference to Related Applications - Reference to sequence listing, a table, or computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure	<ul> <li>4. X Drawing(s) Total Sheets: 5</li> <li>5. Oath or Declaration Total Pages: 1</li> <li>a. X Newly executed (original or copy)</li> <li>b. Copy from a prior application (37 CFR 1.63 (d))</li> <li>i. Deletion of Inventor(s) Signed statement attached deleting Inventors named in prior application.</li> <li>6. Application Data Sheet</li> <li>7. CR-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</li> </ul>						
8 Power of Attorney	APPLICATION PARTS						
9Assignment Papers (cover sheet and docur  1037 CFR 3.73(b) Statement (when there is a  11X Information Disclosure Statement (IDS)  13Preliminary Amendment  14 Certified Copy of Priority Documents(s) (  15 Other:	an assignee)  9 Copies of Citations  if foreign priority is claimed)						
If a Continuing Application:							
Continuation Divisi	onalContinuation-in-part						
Of prior application No.:/ Exam	miner: GAU						

## CORRESPONDENCE ADDRESS

Name:	Kim Parmater		
Address:	19091 Ashcroft Circle		
 City: Country: <u>U</u> :	<u>Minnetonka</u> State: <u>MN</u> Zip <u>SA</u> Telephone: <u>(952) 476-5493</u> Fax:		
	me: Kim Parmater  mature: AMPaumate	Date: 3 14 02	
	EXPRESS MAIL C	CERTIFICATE	
De I he Un ind	Express MAIL" Mailing Label Number eposit Date: 31402 ereby certify under 37 CFR 1.10 that this nited States Postal Service as "Express Micated above and is addresses to the Assophication, Washington, DC 20231	s correspondence is being deposite Mail Post Office to Addressee" or sistant Commissioner for Patents, l	n the date
	Kim Parmater N	Name of Depositor	

# FEE TRANSMITTAL FORM

(Year 2002)

Payment Total \$\_370.00

First Inv	ento	r:		Filing D <u>R, Kim</u> Exa No.: <u>PAR</u>	miner N	Vamo	e:				
				icant claims sm			us (3	37 CI	FR 1.27)		
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1. [ ] De <sub>1</sub>		•			<u>3. A</u>	<u>dditi</u>	onal F	ees:			
	-				Large	Large Entity Small Entity					
					Fee	Fee	Fee	Fee	Description		
					Code 105	(\$) 130	Code 205	(\$) 65	Surcharge- late fee	Fee Pa	
[ ] Charge any additional Fee Required Under 37 CFR 1.16 and 1.17 2. [X] Payment Enclosed					127	50	227	25	Surcharge-late fee Provisional		
[X]	Check	[](	Credit Card [ ] M	Ioney Order	115	110	215	55	Extension 1st mont	h	
Fee Cal	cula	tion ·	,		116	400	216	200	Extension 2 <sup>nd</sup> mon		
			•		117	920	217	460	Extension 3 <sup>rd</sup> mont	h	
1. Basic I	_				118	1440	218	720	Extension 4 <sup>th</sup> mont	h	
Large Entity Fee Fee		-	Description		128	1960	228	980	Extension 5th mont	h	
	Code	Fee (\$)	Description	Fee Paid	119	320	219	160	Notice of Appeal		
101 740 106 330	201 206	370 165	Utility filing fee Design filing fee	\$370	120	320	220	160	Filing Brief in support of an appeal		
107 510	207	255	Plant Filing fee		121	280	221	140	Request oral hearn	ng	
108 740	208	370	Reissue filing fee		140	110	240	55	Petition to retrieve		
114 160	214	80	Provisional fee		141	1280	241	640	unavoidable Petition to retrieve unintentiona		
			Subtotal (1)	\$ <u>370</u>	142	1280	242	640	Utility issue fee		
2. Extra (	Claim	Fees:			143	460	243	230	Design Issue fee		
Total Claim	sc 20	20 -	Extra Fee	Fee Paid	144	620	244	310	Plant issue fee		
Total Claims: 20 -20 = 0 X = Ind. Claims: 2 -3 = 0 X = =				122	130	122	130	Petition fee			
Multiple De	epender	ıt		_=	581	40	581	40	Assignment fee		
Large Entity Fee Fee		-	Description		146	740	246		Filing submission 37 CFR 1 129(a))		
Code (\$)	Code	(\$)		F 20	149	740	249	370	Additional inventi-	on	
103 18 102 84 104 280	203 202 204	9 42 140	Claims in excess of Independent claims Multiple dependen	s in excess of 3	179	740	279	370	FR 1.129(b)) Request for Contir imation (RCE)	ued	
109 84	209	42	Reissue independe		169	900	169	900	Request for expedi		
110 18	210	9	over original paten Reissue claims in e		Other	Other Fee:		exam	ination of design ap	р	
			and over original p Subtotal (2)	\$0	Other	rec			Subtotal (3)	\$	0
Name:	Kim	Parma	ater		Tele	ephor	ne:	(952	2) 476-5493		
Signature		4	Barr	ader		Dat	:e:	3 1	404		_

### THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

PARMATER, Kim

Filed:

Herewith

Title:

Multifunction Exercise Device

Assistant Commissioner for Patents Washington, DC 20231

#### DECLARATION OF MAILING BY "EXPRESS MIAL"

### Kim Parmater \_declares as follows:

- I reside at:
   19091 Ashcroft Circle, Minnetonka, MN 55345
- 2. On 31902 2002, I deposited in the mail, "Express Mail Post Office to Addressee" service of the united States Postal Service, the contents of the envelope for which "Express Mail" receipt No. ET529196259US was issued and addressed to the Assistant Commissioner for Patents, Washington DC 20231.
- 3. Attached hereto is a true copy of the "Express Mail" receipt No. <u>ET529196259US</u>.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements are made with the knowledge that willful false statements and the like so made are punishable by fine, imprisonment or both, under section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the above-identified application or any patents issued thereon.

Date: 3 14 02 Signed; Kontamoste